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INFO RUEHZN/ENVIRONMENT SCIENCE AND TECHNOLOGY COLLECTIVE
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UNCLAS SECTION 01 OF 02 BERLIN 000847

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SUBJECT: ROBERT-KOCH-INSTITUTE DESCRIBES FLU SITUATION IN
GERMANY

REF: A) Berlin 844, B) Berlin 839 and previous.

¶1. (SBU) Summary. On July 8, ECON Berlin met with officials from the Robert-Koch-Institute (RKI) to discuss the current H1N1 outbreak in Germany. RKI experts believe there could be ten times the number of confirmed cases (691) in Germany due to the often mild symptoms experienced by many of those infected by H1N1. RKI officials believe that H1N1 infections in Germany will rise this fall in connection with seasonal influenza. RKI representatives expressed concern that antiviral-resistant strains of H1N1 could develop that could strain public health responses. End Summary

Fall Outbreak Could Be More Serious

¶2. (SBU) EconOff met with Prof Dr. Reinhard Burger, vice president of RKI and head of the Department of Infectious Diseases, and Dr. Brunhilde Schweiger, RKI's top virologist, to discuss the evolution of the H1N1 virus in Germany. RKI provides the German government with information about pandemic situations, pandemic influenza preparedness, and response planning. Burger and Schweiger agreed that there is no doubt that the world is facing a pandemic and both assessed that the numbers of confirmed cases in Germany (691) dramatically understates the actual extent of the pandemic. Burger cautioned that the number of infections could be at a minimum ten times higher than the confirmed virus cases factoring in the mild symptoms of the virus. Since it is so mild, many people often do not know they have it.

¶3. (SBU) RKI expects a sharp rise in the levels of H1N1 influenza activity in the fall when it could potentially be much more serious as seasonal influenza cases increase. It is impossible to predict the extent or severity of the H1N1 illness this fall, only that the virus will circulate and most people will have no immunity, Burger indicated. RKI's major concern is that the new virus could become stronger, circulating not only with the viruses that typically cause

seasonal influenza but other types such as H5N1. Burger mentioned that H5N1 did not disappear and that there are more infected animals than ever living with humans, which increases the risk of exchanges of virus elements. However, RKI anticipates it is more likely that the new flu will circulate with the seasonal flu rather than with H5N1.

Antiviral Medication and Vaccine

¶4. (SBU) At present, there is no clear indication of a certain group of people that is more vulnerable to become infected with the new virus than other groups, RKI said. The institute seemed generally dubious about the utility of antiviral medication such as Tamiflu or Relenza as large-scale solutions in Germany. Although, considering that there are already Tamiflu-resistant strains, RKI sees it as the best available alternative before a vaccine is produced. RKI indicated that a change in the form of the H1N1 virus over the next few months could set current investments made in the vaccine at risk, shifting it from a scientific issue to a political decision on how well prepared each federal state plans to be. The responsibility for vaccination of the population lies in the hands of the federal states' governments.

¶5. (SBU) RKI pointed out that Germany's national pandemic influenza plan allows all federal states to be on the same preparedness level. However, uneven financial resources among the states hinder them from implementing measures. RKI seemed concerned that not all federal states follow its

BERLIN 00000847 002 OF 002

recommendation to stockpile 20 percent of antiviral medication because of budget constraints (Schleswig-Holstein currently has 11 percent of antivirals on stock while North Rhine-Westphalia can supply 30 percent of its population with antiviral medications).

Laboratories testing H1N1

¶6. (SBU) RKI said that Germany has over 20 laboratories that are able to detect and test the new flu using certain standards enabling findings to be entered into a database without prior approval by RKI. Virological analyses are being performed through universities, state health authority laboratories, and local laboratories. All certified laboratories are obliged to report findings via local health authorities to RKI. RKI is in direct contact with all public health officials across the states to coordinate and make sure that there is timely reporting, ensuring that if new cases come up they are being track effectively.

Coordination at International Level

¶7. (SBU) Unlike military personnel in Germany who are required to report new infections of H1N1 though the German Ministry of Defense to RKI, non-Germans tested positive for the virus are not actively advised to contact their respective embassy, RKI indicated. However, RKI said that a dialogue with foreign embassies should take place through the ministry of health and not through the states.

¶8. (SBU) RKI said it maintains a close relationship to other international organizations dealing with the new virus to ensure rapid response to the global threat. Thus, it reports directly to the World Health Organization and the European Center for Disease Control to coordinate universal testing measures such as the Polymerase Chain Reaction, PCR. RKI has

a direct connection to the US Center for Disease Control and actively engages in meetings.

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